



TOWN OF GRAFTON

GRAFTON MEMORIAL MUNICIPAL CENTER 30 PROVIDENCE ROAD **GRAFTON, MASSACHUSETTS 01519**

Phone: (508) 839-5335 ext 1170 * FAX: (508) 839-4602 www.grafton-ma.gov



AUG - 9 2017

TREASURER / COLLECTOR

PLANNING BOARD **GRAFTON, MA**

Permit Issued?

Certificate of Good Standing

Applicants seeking permits with the Town of Grafton must submit this completed form at the time of application. When all obligations are paid to date, you must attach this "Certificate of Good Standing," with your application. Delinquent bills must be paid in full before the appropriate department accepts your application. Please make arrangements to pay these outstanding bills at the Collector's Office.

Please note: it can take up to three (3) business days to process each request.

Please check all that apply and indicate if permit(s) have been issued.

Permit Issued?

| | | Yes | No | | | Yes | No | |
|---|--|-------|------------|--------------|-------------|--------|-----|--|
| | Building - Inspection(s) | | (<u>-</u> | □Sep | otic System | | | |
| | Building - Electric | | | © Co₁ | nservation | V | _ | |
| C | Building - Plumbing | | | P Pla | nning | V | | |
| | Board of Health | | | □Oti | ner | | | |
| | | | | | | | | |
| C | Other Permit: | | | _ | | | | |
| | COLORIO REGU | Ter 1 | 10 | (| m main f | Senera | 110 | |
| _ | Petitioner Name COLORIO REACTY LLC Property Owner / Company Name | | | | | | | |
| 13 | 3 81 CROOPER HILL RD 13 81 CROOPER HILL RD | | | | | | | |
| | Petitioner Address Property Address | | | | | | | |
| | | | | | | | | |
| City, State, Zip Grafton, MA City, State, Zip | | | | | | | | |
| | 4 | | | | | | | |
| (508) 839-3035 Phone | | | | | | | | |
| | Phone | | | | | | | |
| | Date: | | Cı | ırrent | Delinque | ent | N/A | |
| | Real Estate | | ١ | | | | | |
| | Personal Property | | | | | | × | |
| | Motor Vehicle Excise | | | | | | × | |

| Date: | Current | Delinquent | N/A |
|----------------------|---------|------------|-----|
| Real Estate | X | | |
| Personal Property | | | × |
| Motor Vehicle Excise | = 200 | | X |
| Disposal | | | X |
| General Billing | 0 | | |

Treasurer / Collector Name (please print)

Treasurer / Collector Signature

Form Revised: 01/22/2014